

| University of Washington Medical Center                                  |                                     |
|--|-------------------------------------|
| <b>DEPARTMENT:</b><br>Administration                                     | <b>DOCUMENT TYPE:</b><br>APOP       |
| <b>DATE OF ORIGIN:</b><br>05/1992  | <b>LAST REVIEW DATE:</b><br>07/2020 |
| <b>APPROVED BY:</b><br>UWMC Chief Nursing Officer, UWMC Medical Director |                                     |

## APOP: Patients' Rights & Responsibilities in General

### SUMMARY OF CHANGES:

- Added step 5. to "Patients are responsible for the following UW Medical Center rules and regulations affecting patient care and conduct" section on page 3, July 2020.

### POLICY:

#### Patient Rights:

1. Patients have the right to be treated and cared for with dignity and respect.
2. Patients have the right to reasonable access to care and treatment and/or accommodations that are available or medically advisable regardless of one's race, color, creed, religion, sex, sexual orientation, gender identity, national origin, disability, age, status as a disabled veteran, having an Advance Directive or ability to pay for care.
3. Patients have the right to care that is considerate and respectful of their cultural and personal values and beliefs, as well as their psychosocial values and preferences.
4. Patients have the right to express their values and beliefs and to exercise spiritual and cultural beliefs that do not interfere with the delivery of patient care and the well-being of others or their planned course of treatment.
5. Patients have the right to reasonable access to an interpreter when they do not speak or understand the English language.
6. Patients have the right to a reasonably safe and secure environment.
7. Patients have the right to be free from all forms of abuse, neglect, exploitation or harassment.
8. Patients have the right to be free from restraint or seclusion, of any form, imposed as a means of coercion, discipline, convenience or retaliation. Restraint or seclusion may only be imposed to ensure the immediate physical safety of the patient, a staff member or others, and must be discontinued at the earliest possible time.
9. Patients, the family, and/or their legally authorized surrogate decision-maker(s) have the right, in collaboration with their doctor to be informed and involved in making decisions about their health care, including resolving problems with care decisions, the right to accept medical care or to refuse treatment to the extent of the law, and to be informed of the medical consequences of such refusal.
10. Patients have the right to be informed of unanticipated outcomes.
11. Patients have the right to access their own health information, request amendment to it, and receive an accounting of disclosures about it, as permitted under applicable law.
12. Patients have the right to have a family member or representative of their choice and their own doctor (if requested) notified promptly of their admission to the hospital.

13. Patients have the right to formulate advance directives about end-of-life decisions and have the hospital respect and follow those directives to the extent allowable by hospital policy, state and federal law.
14. Patients have the right to appoint a surrogate to make health-care decisions on their behalf to the extent of the law.
15. Patients have the right to be fully informed of their healthcare needs and the alternatives for care when a hospital cannot provide the care a patient requests. If it is necessary and medically advisable, the patient will be transferred to an appropriate and acceptable facility.
16. Patients have the right to effective pain management. Pain will be assessed and managed as deemed medically appropriate.
17. Patients have the right to consideration for their personal privacy and confidentiality of information.
18. Patients have the right to know the name of the doctor and other practitioners who have primary responsibility for their care, and to know the identity and professional status of individuals responsible for authorizing and performing procedures and care.
19. Patients have the right to have reasonable access to people outside UW Medical Center by means of visitors, and by verbal and written communication. Such access is permitted so long as it does not interfere with the provision of patient care services and a reasonably safe and secure environment. Any restrictions on communication are fully explained to the patient and/or family.
20. Patients have the right not to participate in investigative studies and they will be informed of alternative care options. Patients' access to care shall not be hindered should they decline to participate in investigative studies.
21. Patients have the right to participate in ethical questions and care concerns including issues of conflict resolution, withholding resuscitative services, foregoing or withdrawing of life-sustaining treatment, and participating in investigational studies or clinical trials.
22. Patients have the right to have access to spiritual care.
23. Patients have the right to have access to a written statement that articulates the rights and responsibilities of patients. The statement is available in several languages specific to the populations served. If the patient cannot read, has special communication needs, or if the statement is not available in their language, an interpreter will be available.
24. Patients have the right to be protected from abuse and neglect and access protective services. Children or vulnerable adults who are unable to care for themselves have the right to protective intervention by the appropriate agencies to correct hazardous living conditions, abuse, neglect, or exploitation.
25. Patients have the right to make complaints about their care and receive a timely response according to established policy. Patients can freely voice complaints and recommend changes without being subject to coercion, retribution, discrimination, or unreasonable interruption of care, treatment and services.
26. Patients have the right to request and receive an itemized detailed explanation of their bill for services rendered.

**Patient Responsibilities:**

1. Patients have the responsibility to provide, to the best of their knowledge, accurate and complete information, and to report any changes in their condition to their practitioner.
2. Patients have the responsibility to participate in discussion about, and to ask questions about, their plan of care.
3. Patients have the responsibility to inform the care team if they do not clearly understand a contemplated course of action and what is expected of them.

4. Patients have the responsibility of notifying their health-care providers when a cultural situation exists concerning the health-care process.
5. Patients are responsible for following the treatment plan to which they agreed. Patients and their families are responsible for the outcomes if they do not follow the care, treatment, and service plan.
6. Patients are responsible for their personal belongings. This includes, but is not limited to dentures, eyeglasses, crutches, wheelchairs, and personal items such as jewelry. The UWMC is not responsible if these items are damaged or misplaced while here.

**Patients are responsible for the following UW Medical Center rules and regulations affecting patient care and conduct:**

1. Patients may not disturb other patients.
2. Patients may not disrupt or interfere with care provided to other patients and the operations of the medical center.
3. Patients may not conduct any illegal activities on the premises of the medical center.
4. Patients may not verbally or physically assault staff, faculty or providers.
5. Patients are responsible for being considerate of the rights of other patients and Medical Center personnel. Threats, violence, disrespectful communication or harassment of other patients or of any Medical Center staff member, for any reason, including because of an individual's race, color, creed, religion, sex, sexual orientation, gender identity or expression, ethnicity, national origin, disability, age or veteran or military status, or other aspect of difference will not be tolerated. This prohibition applies to the patient as well as their family members, representatives, and visitors.

In addition, requests for changes of provider or other medical staff based on that individual's race, ethnicity, religion, sexual orientation or gender identity will not be honored. Requests for provider or medical staff changes based on gender will be considered on a case by case basis and only based on extenuating circumstances.

6. Patients are responsible for informing the caregivers if they have special needs.
7. Patients are responsible for being respectful of the property of other persons and the medical center.
8. Patients are responsible for meeting any financial obligation agreed to with the hospital.
9. Patients are responsible for reporting any complaints or concerns to a member of their health-care team, who will then contact appropriate staff.

**Patient Rights and Responsibilities Brochures**

The University of Washington Medical Center provides patients their rights through the provision of the "Information About Your Healthcare" booklet, which is available in several locations throughout the Medical Center.

Ambulatory Care Clinics: Brochures will be placed in the clinic waiting areas and in the patient care areas. It is the responsibility of each clinic manager to designate the most accessible locations within their clinic(s) for this information. Clinic personnel will ascertain that patients have received a copy of their rights and responsibilities. If the patient is unable to receive the patient rights information, information will be given to family/significant other.

Registration Areas: Brochures will be available to patients at:

- 2<sup>nd</sup> floor Emergency Services Registration Desk (see additional note below)
- 3<sup>rd</sup> floor Registration Desk
- Admitting Office
- Roosevelt Information Desk & all Clinics

Inpatient Nursing Units: Patient rights and responsibilities information will be available on all inpatient units. Nursing staff will ascertain that the patient received written information on patient rights and will review the rights with the patient. If the patient is unable to receive the information, patient rights information will be given to the patient's family/significant other.

Emergency Services: Patient rights and responsibilities information will be available to patients at the Emergency Medical Services Reception Desk. If the patient is unable to receive this information, it will be given to the patient's family/significant other.

Social Work Department: Social workers will assist in the Inpatient and Ambulatory Care areas to ensure patients have received information regarding their rights and responsibilities.

**CROSS REFERENCE:**

- [APOP: Advance Directive \(Federal Patient Self-Determination Act\)](#)

**REVIEW/REVISION DATES:**

05/1992, 05/1998, 08/2001, 04/2006, 07/2010, 02/2011, 01/2014, 02/2014, 05/2014, 07/2015, 04/2018, 07/2020

**REVIEWED BY:**

Lisa Robinson, Manager, Clinical Regulatory Compliance and Accreditation

**APPROVED BY:**

Cindy Sayre, PhD, RN, UWMC Chief Nursing Officer, [csayre@uw.edu](mailto:csayre@uw.edu)

Thomas O. Staiger, MD; UWMC Medical Director; [staiger@uw.edu](mailto:staiger@uw.edu)